Case:18-01084-ESL7 Doc#:1 Filed:02/28/18 Entered:02/28/18 18:34:33 Desc: Main Document Page 1 of 62

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF PUERTO RICO	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	Writ	e the name that is on	ELIEZER	
	pictur	r government-issued ure identification (for mple, your driver's	First name	First name
	licer	nse or passport).	Middle name	Middle name
	Bring your picture		REYES CASTRO	
	iden	itification to your eting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
		ude your married or den names.		
3.	you nun Indi	y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number	xxx-xx-6685	

Case number (if known)

Debtor 1 ELIEZER REYES CASTRO

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live		If Debtor 2 lives at a different address:
		BO. MONTONES II SECTOR TIERRA LINDA CARR. 919 KM 5.1 Las Piedras, PR 00771	
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Las Piedras County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		PO BOX 1428	
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
ò.	Why you are choosing	Check one:	Check one:
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Debtor 1 ELIEZER REYES CASTRO Document Page 3 of 62 Case number (if known)

Par	Tell the Court About	Your B	ankruptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are			rief description of each, see Λ go to the top of page 1 and ch			C. § 342(b) for Individu	uals Filing for Bankruptcy
	choosing to file under	■ Chapter 7						
		□ cl	hapter 11					
			hapter 12					
			hapter 13					
			·					
8.	How you will pay the fee	•	about how yo	entire fee when I file my per u may pay. Typically, if you ar attorney is submitting your par address.	e paying	the fee yourself,	you may pay with cash	n, cashier's check, or money
				the fee in installments. If yo		e this option, sign	and attach the Applica	ation for Individuals to Pay
			J	e in Installments (Official Form t my fee be waived (You may	,	this option only if	you are filing for Char	oter 7. By law, a judge may.
			but is not requapplies to you	uired to, waive your fee, and n ur family size and you are unal on to Have the Chapter 7 Filing	nay do so ole to pa	o only if your inco y the fee in install	me is less than 150% of ments). If you choose t	of the official poverty line that this option, you must fill out
9.	Have you filed for bankruptcy within the	□ No						
	last 8 years?	■ Ye	·S.					
			District	DISTRICT OF PUERTO	When	7/13/17	Case number	17-04962-ESL
			District		When		Case number	
			District		When		Case number	
					-			
10.	Are any bankruptcy cases pending or being filed by a spouse who is	■ No						
	not filing this case with you, or by a business partner, or by an affiliate?							
			Debtor				Relationship to y	ou
			District		When		Case number, if	known
			Debtor				Relationship to y	ou
			District		When		Case number, if	known
11.	Do you rent your		. Go to li	ne 12				
	residence?	■ No		ur landlord obtained an eviction	n judam	ent against you?		
		☐ Ye	_	No. Go to line 12.	ni juugili	om agamst you!		
				Yes. Fill out <i>Initial Statement</i>	About a	Eviction Judama	ant Against Vou (Earm	101A) and file it with this
				bankruptcy petition.	ADOUL AI	i Evicuori Juagme	an Ayamsi 100 (FORM	TOTA) and the it with this

Debtor 1 ELIEZER REYES CASTRO

Document Page 4 of 62

Case number (if known)

ar	Report About Any Bu	sinesses	You Own	as a Sole Propriet	or	
12.	Are you a sole proprietor of any full- or part-time business?	□ No.	Go to	Part 4.		
		Yes.	Name	and location of busi	iness	
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one			Name BO M SECT	ZER REYES CAS of business, if any MONTONES II T. TIERRA LINDA Piedras, PR 0077		
	sole proprietorship, use a			er, Street, City, State		
	separate sheet and attach it to this petition.			· ·	x to describe your business:	
				Health Care Busin	ess (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))	
				Commodity Broker	r (as defined in 11 U.S.C. § 101(6))	
				None of the above		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation in 11 U.S	you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate addines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement perations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the proced 11 U.S.C. 1116(1)(B).			
	For a definition of small	■ No.	I am n	not filing under Chapt	ter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankr Code.			
		☐ Yes.	I am fi	iling under Chapter 1	11 and I am a small business debtor according to the definition in the Bankruptcy Code.	
Part	t 4: Report if You Own or	Have Any	/ Hazardo	ous Property or Any	/ Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat of imminent and	■ No.	What is t	the hazard?		
	identifiable hazard to public health or safety? Or do you own any					
	property that needs immediate attention?			liate attention is why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?		
	•				Number, Street, City, State & Zip Code	

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Debtor 1 ELIEZER REYES CASTRO

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2	(Spouse	Only in a	Joint	Case)	
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You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 ELIEZER REYES CASTRO Document Page 6 of 62 Case number (if known)

Part	6: Answer These Questi	ons for Re	porting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily consumindividual primarily for a personal,			in 11 U.S.C. § 101(8) as "incurred by an		
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.	Are your debts primarily busine money for a business or investme					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe that are not consumer debts or business debts					
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. G	o to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Do yo are paid that funds will be available			is excluded and administrative expenses		
	administrative expenses are paid that funds will		■ No					
	be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-19		□ 1,000-5,000 □ 5001-10,000 □ 10,001-25,00		☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000		
19.	How much do you estimate your assets to be worth?	\$100,0	0,000 1 - \$100,000 01 - \$500,000 01 - \$1 million	\$1,000,001 - \$10,000,001 \$50,000,001 \$100,000,000	- \$50 million - \$100 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion		
20.	How much do you estimate your liabilities to be?	\$100,0	0,000 01 - \$100,000 01 - \$500,000 01 - \$1 million	□ \$1,000,001 - □ \$10,000,001 □ \$50,000,001 □ \$100,000,00	- \$50 million - \$100 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
Part	7: Sign Below							
For	you	I have exa	amined this petition, and I declare	under penalty of p	erjury that the information	on provided is true and correct.		
			hosen to file under Chapter 7, I an ates Code. I understand the relief a	•		der Chapter 7, 11,12, or 13 of title 11, se to proceed under Chapter 7.		
			ney represents me and I did not pa , I have obtained and read the not			attorney to help me fill out this		
		I request	relief in accordance with the chapte	er of title 11, Unite	d States Code, specifie	d in this petition.		
		bankrupto and 3571.	y case can result in fines up to \$25			operty by fraud in connection with a s, or both. 18 U.S.C. §§ 152, 1341, 1519,		
		ELIEZEF	R REYES CASTRO of Debtor 1		Signature of Debtor 2			
	Executed on February 28, 2018 Executed on MM / DD / YYYYY MM / DD / YYYYY					D/YYYY		

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Debtor 1 ELIEZER REYES CASTRO Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ RAMON F. LOPEZ, ESQ.	Date	February 28, 2018	
Signature of Attorney for Debtor		MM / DD / YYYY	
RAMON F. LOPEZ, ESQ. 203813 PR			
Printed name			
RAMON F. LOPEZ LAW OFFICES, P.S.C.			
Firm name			
PO BOX 34173			
Fort Buchanan, PR 00934			
Number, Street, City, State & ZIP Code			
Contact phone	Email address		
203813 PR			
Bar number & State			

Fill in this informa	ation to identify your	case:	- age 8 8 82		
Debtor 1	ELIEZER REYES	CASTRO			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Banl	kruptcy Court for the:	DISTRICT OF PUERTO RIC	0		
Case number				1	☐ Check if this is ar amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	165,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	47,445.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	212,445.00
Pa	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	230,040.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	8,438.12
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	128,004.80
	Your total liabilities	\$	366,482.92
Pa	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,378.12
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,552.00
Pa	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
7.	■ Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 ELIEZER REYES CASTRO

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

4,486.37

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total c	laim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	8,438.12
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	8,438.12

	Case:1	.8-01084-E	SL7 Doc#::			/18 Entered:02/2	8/18 18:	34:33 [Desc: Main
Fill	in this informa	ation to identify	your case and th			Page 10 of 62			
Deb	otor 1	ELIEZER RE	YES CASTRO						
		First Name	Middle	Name		Last Name			
	otor 2 use, if filing)	First Name	Middle	Name		Last Name			
Uni	ted States Bank	kruptcy Court for	the: DISTRICT	OF PUE	RTO RICO				
Cas	se number					_			☐ Check if this is ar amended filing
_		m 106A/B	-						
30	chedule	: A/B: Pr	operty						12/15
nfor Ansv	mation. If more s ver every question	space is needed, a on.	attach a separate sl	neet to t	nis form. On th	e are filing together, both are le top of any additional page: wn or Have an Interest In			
	No. Go to Part 2								
1.1	BO MONTO SECT TIERI CARR 919 I	RA LINDA KM 5.1			Single-family Duplex or mu	y? Check all that apply home Iti-unit building n or cooperative	the amoun	t of any secured	nims or exemptions. Put d claims on <i>Schedule D:</i> ns Secured by Property.
	Street address, if a	available, or other des	cription						
	Las Piedras	s PR	00771-0000		Manufactured Land	l or mobile home	Current va		Current value of the portion you own?
	City	State	ZIP Code			operty	\$1	65,000.00	\$165,000.00
					Other		(such as f	ee simple, tena	our ownership interest ancy by the entireties, or
				Who	has an interes Debtor 1 only	t in the property? Check one	FEE SIN	e), if known. IPLE	
	Las Piedras	3			Debtor 2 only				
	County				Debtor 1 and	•			munity property
				Othe		of the debtors and another rou wish to add about this ite	,	structions)	
				Jule	ormanon y	שם אוסוו נט מעט מטטענ נוווס ונכ	ııı, əucii aə il	, oui	

property identification number:

2383.54 SQ. METER LOT WITH A CONCRETE STRUCTURE WITH LVING AND DINNING ROOMS, 3 BEDROOMS, 3 BATHS, KITCHEN, CARPOT AND **BALCONY. (LESS 105 EXPENSES)**

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.......>>

\$165,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Page 11 of 62
Case number (if known) **ELIEZER REYES CASTRO** Debtor 1 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put **FORD** Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: **ESCAPE** Creditors Who Have Claims Secured by Property. Model: ■ Debtor 1 only 2014 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another \$9,775.00 \$9,775.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put **MERCEDES BENZ** Who has an interest in the property? Check one 3.2 Make: the amount of any secured claims on Schedule D: C300 Creditors Who Have Claims Secured by Property. ■ Debtor 1 only Model: 2015 Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? portion you own? ☐ Debtor 1 and Debtor 2 only Other information: At least one of the debtors and another LEASE CONTRACT \$30,075.00 \$30,075.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$39.850.00 Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... LIVING AND DINNING ROOM SETS, BEDROOM SET, REFRIGERATOR, STOVE, MICROWAVE, WASHER AND DRYER \$1,500.00 MACHINES, KITCHENWARE, LINENS AND CHINA 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games □ No Yes. Describe.....

TV, RADIOS, COMPUTER, DVD, CELLPHONE, SCANNER

\$700.00

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Case number (if known) Document Debtor 1 **ELIEZER REYES CASTRO** 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$100.00 CLOTHES, SHOES AND ACCESORIES 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... WRIST WATCH AND RING \$300.00 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list □ No Yes. Give specific information..... HAND TOOLS \$1,000.00 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$3,600.00 for Part 3. Write that number here

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☐ No

Yes

Cash

\$100.00

page 3

Page 13 of 62 Case number (if known) Document Debtor 1 **ELIEZER REYES CASTRO** 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... Savings **PENFED** \$25.00 17.1. Saving and checking **FIRST BANK** \$3.870.00 17.2. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them...

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

No

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Debtor	1 ELIEZER REYES CASTRO	Page 14 of 62 Case number (if known)	
ПΥ	es. Give specific information about them		
Money	or property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	t refunds owed to you lo 'es. Give specific information about them, including whether you alre	ady filed the returns and the tax years	
Ex ■ N	nily support amples: Past due or lump sum alimony, spousal support, child support o o c s d o c s d o c s d o c d o c d o c d o c d o c d o c d o c d o d	ort, maintenance, divorce settlement, property set	tlement
Ex ■ N	ner amounts someone owes you samples: Unpaid wages, disability insurance payments, disability ben- benefits; unpaid loans you made to someone else lo es. Give specific information	efits, sick pay, vacation pay, workers' compensa	tion, Social Security
31. Inte	erests in insurance policies amples: Health, disability, or life insurance; health savings account (l	HSA); credit, homeowner's, or renter's insurance Beneficiary:	Surrender or refund value:
If y so ■ N	y interest in property that is due you from someone who has die you are the beneficiary of a living trust, expect proceeds from a life in meone has died. Io yes. Give specific information		property because
Ex ■ N	ims against third parties, whether or not you have filed a lawsui amples: Accidents, employment disputes, insurance claims, or rights lo 'es. Describe each claim		
	ner contingent and unliquidated claims of every nature, including lo es. Describe each claim	g counterclaims of the debtor and rights to se	t off claims
	y financial assets you did not already list lo fes. Give specific information		
	dd the dollar value of all of your entries from Part 4, including and an error of the that number here		\$3,995.00
Part 5:	Describe Any Business-Related Property You Own or Have an Interest	n. List any real estate in Part 1.	
_ `	rou own or have any legal or equitable interest in any business-related pop. Go to Part 6.	roperty?	

Official Form 106A/B Schedule A/B: Property page 5

 \square Yes. Go to line 38.

Deb	otor 1	ELIEZER REYES CASTRO	Document	Page 15 01 0	Case number (if known)	
Part		Describe Any Farm- and Commercial Fishing-Rel f you own or have an interest in farmland, list it in Pa		n or Have an Interes	st In.	
46.	Do v	ou own or have any legal or equitable inte	rest in any farm- or	commercial fishin	q-related property?	
	■ _N	lo. Go to Part 7.	•			
	ПΥ	es. Go to line 47.				
Part	7:	Describe All Property You Own or Have an I	Interest in That You Di	d Not List Above		
53.		ou have other property of any kind you did				
	Exai ■ No	, ,	iriip			
		s. Give specific information				
		•			г	1
54.	Add	d the dollar value of all of your entries from	n Part 7. Write that r	number here		\$0.00
Part	8:	List the Totals of Each Part of this Form				
55.	Par	t 1: Total real estate, line 2				\$165,000.00
56.	Par	t 2: Total vehicles, line 5		\$39,850.00		
57.	Par	t 3: Total personal and household items, li	ine 15	\$3,600.00		
58.	Par	t 4: Total financial assets, line 36		\$3,995.00		
59.	Par	t 5: Total business-related property, line 4	.5	\$0.00		
60.	Par	t 6: Total farm- and fishing-related propert	ty, line 52	\$0.00		
61.	Par	t 7: Total other property not listed, line 54	+_	\$0.00		
62.	Tot	al personal property. Add lines 56 through 6	61	\$47,445.00	Copy personal property to	stal \$47,445.00

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$212,445.00

nation to identify your	case:					
ELIEZER REYES CASTRO						
First Name	Middle Name	Last Name				
First Name	Middle Name	Last Name				
nkruptcy Court for the:	DISTRICT OF PUERTO R	ICO				
			☐ Check if this is an amended filing			
	ELIEZER REYES First Name	First Name Middle Name First Name Middle Name	ELIEZER REYES CASTRO First Name Middle Name Last Name First Name Middle Name Last Name	ELIEZER REYES CASTRO First Name Middle Name Last Name First Name Middle Name Last Name Okruptcy Court for the: DISTRICT OF PUERTO RICO		

Official Form 106C

Part 1: Identify the Property You Claim as Exempt

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.				
	☐ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	■ You are claiming federal exemptions. 11 l	J.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	LIVING AND DINNING ROOM SETS, BEDROOM SET, REFRIGERATOR,	\$1,500.00		\$1,500.00	11 U.S.C. § 522(d)(3)
	STOVE, MICROWAVE, WASHER AND DRYER MACHINES, KITCHENWARE, LINENS AND CHINA. Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
	TV, RADIOS, COMPUTER, DVD, CELLPHONE, SCANNER	\$700.00		\$700.00	11 U.S.C. § 522(d)(3)
	Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
	CLOTHES, SHOES AND ACCESORIES	\$100.00		\$100.00	11 U.S.C. § 522(d)(3)
	Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	
	WRIST WATCH AND RING	\$300.00		\$300.00	11 U.S.C. § 522(d)(4)
	Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit	
	HAND TOOLS	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(5)
	Line from Schedule A/R: 14 1				

100% of fair market value, up to any applicable statutory limit

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Denio	ELIEZEN NETES CASTRO				
	rief description of the property and line on chedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
_	cash ine from <i>Schedule A/B</i> : 16.1	\$100.00		\$100.00	11 U.S.C. § 522(d)(5)
L	ine ironi Scriedule Arb. 10.1			100% of fair market value, up to any applicable statutory limit	
	avings: PENFED	\$25.00		\$25.00	11 U.S.C. § 522(d)(5)
	ine nom <i>Schedule Arb.</i> 11.1			100% of fair market value, up to any applicable statutory limit	
	saving and checking: FIRST BANK ine from Schedule A/B: 17.2	\$3,870.00		\$3,870.00	11 U.S.C. § 522(d)(5)
_	ine nom ochedule AVB. 17.2			100% of fair market value, up to any applicable statutory limit	
	re you claiming a homestead exemption Subject to adjustment on 4/01/19 and every No Yes. Did you acquire the property cover No Yes	3 years after that for ca	ases fi		

	Document	Page 18	of 62		
Fill in this information to identify	y your case:				
Debtor 1 ELIEZER R	EYES CASTRO				
First Name	Middle Name	Last Name		-	
Debtor 2					
(Spouse if, filing) First Name	Middle Name	Last Name		-	
	" DISTRICT OF BUEDTO BIOG				
United States Bankruptcy Court fo	or the: DISTRICT OF PUERTO RICO			-	
Case number					
(if known)				☐ Check	if this is an
					led filing
					3
Official Form 106D					
	oro Who Llovo Cloimo	Caarmad	by Droport		4044
Schedule D: Credit	ors Who Have Claims	<u>Secured</u>	by Propert	<u>y </u>	12/15
	sible. If two married people are filing togeth fill it out, number the entries, and attach it				
1. Do any creditors have claims secu	red by your property?				
	**		. In account of the second and	a manufacture (b) a famo	
☐ No. Check this box and sur	omit this form to the court with your other	schedules. You	u nave notning eise t	o report on this form.	
Yes. Fill in all of the information	ation below.				
Part 1: List All Secured Claim	ns				
	r has more than one secured claim, list the cre	ditor congratoly	Column A	Column B	Column C
for each claim. If more than one credit	or has a particular claim, list the other creditors that a particular claim, list the other creditors thabetical order according to the creditor's name	s in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 BANCO POPULAR	Describe the property that secures	the claim:	\$167,761.00	\$165,000.00	\$2,761.00
Creditor's Name	BO MONTONES II SECT TIE				
	LINDA CARR 919 KM 5.1 La Piedras, PR 00771 Las Pied County 2383.54 SQ. METER LOT WI CONCRETE STRUCTURE W LVING AND DINNING ROOM BEDROOMS, 3 BATHS, KITO CARPOT AND BALCONY. (I	TH A TITH IS, 3 CHEN, LESS			
PO BOX 362708	As of the date you file, the claim is: apply.	Check all that			
San Juan, PR 00936	Contingent				
Number, Street, City, State & Zip Cod					
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	An agreement you made (such as	mortgage or secu	ired		
Debtor 2 only	car loan)				
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	chanic's lien)			
☐ At least one of the debtors and ano	ther U Judgment lien from a lawsuit	,			
☐ Check if this claim relates to a community debt	☐ Other (including a right to offset)				
Date debt was incurred 2014	Last 4 digits of account num	ber <u>7904</u>			
DENTA CON FEDERAL					
2.2 PENTAGON FEDERAL	December the managery that accuracy	tha alaim.	\$12,875.00	\$9,775.00	\$3,100.00
CREDIT UNION Creditor's Name	Describe the property that secures	The Claim.	Ψ12,070.00	Ψο,ι ι ο.οο	Ψο, του.σο
orealier o Name	2014 FORD ESCAPE NOT IN DEBTOR'S POSSES	SION			
	PAID BY A THIRD PARTY				
	PAID BY A THIRD PARTY				
PO BOX 456	As of the date you file, the claim is:	Check all that			
Alexandria, VA 22313	apply.				
	Contingent				
Number, Street, City, State & Zip Cod					
	☐ Disputed				

Official Form 106D

Who owes the debt? Check one.

Nature of lien. Check all that apply.

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Debtor 1	ELIEZER I	REYES CAST	ΓRO	Case	e number (if know)		
	First Name	Middle	Name Last Name		-		
■ Debtor	,		An agreement you made (such as morte car loan)	gage or secured			
	1 and Debtor 2	2 only	☐ Statutory lien (such as tax lien, mechan	ic's lien)			
☐ At leas	t one of the deb	otors and another	☐ Judgment lien from a lawsuit				
	if this claim re nunity debt	elates to a	Other (including a right to offset)				
Date debt	was incurred	1/2015	Last 4 digits of account number	6867			
2.3 PO	PULAR AU	то	Describe the property that secures the c	laim:	\$49,404.00	\$34,075.00	\$15,329.00
Cred	itor's Name		2015 MERCEDES BENZ C300				
	BOX 15011 n Juan, PR	1 00902-8511	As of the date you file, the claim is: Checapply. ☐ Contingent	k all that			
Num	ber, Street, City, S	State & Zip Code	☐ Unliquidated ☐ Disputed				
Who owe	s the debt? C	Check one.	Nature of lien. Check all that apply.				
■ Debtor □ Debtor	,		An agreement you made (such as morte car loan)	gage or secured			
☐ Debtor	1 and Debtor 2	2 only	☐ Statutory lien (such as tax lien, mechan	ic's lien)			
☐ At leas	t one of the deb	otors and another	☐ Judgment lien from a lawsuit				
	if this claim re nunity debt	elates to a	Other (including a right to offset)				
Date debt	was incurred	2016	Last 4 digits of account number	8372			
Add the	dollar value o	f vour entries in	Column A on this page. Write that number I	nere.	\$230,040.0	\overline{n}	
		•	d the dollar value totals from all pages.	ici c.	\$230,040.0	_	
Write th	at number her	٠.	, -		 ⊅∠3U,U4U.U	J	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Write that number here:

				Document	Page '	<u> 20 of 6</u>	52			
Fill in	this infor	mation to identify your ca	ase:							
Debto	r 1	ELIEZER REYES C	ASTRO							
		First Name	Middle	Name	Last Name					
Debto		- Time to the second se								
(Spouse	e if, filing)	First Name	Middle	e Name	Last Name					
United	d States Ba	ankruptcy Court for the:	DISTRICT	OF PUERTO RICO						
Case	number									
(if know	_								Check	if this is an
									amend	ed filing
Ott: -	:-! =	400E/E								
		<u>m 106E/F</u>			. .					40/45
		E/F: Creditors What accurate as possible. Use								12/15
Schedu	ile D: Credi ach the Co	utory Contracts and Unexpir tors Who Have Claims Secu ntinuation Page to this page	red by Prop	erty. If more space is n	needed, cop	y the Part	you need, fill it οι	t, number the	entries in	the boxes on the
	nd case nu	mber (if known).			ont iii a i ai	.,				
name a		,	ecured Cla	aims	ort iii a i ai	.,				
name a Part 1	List A	imber (if known). All of Your PRIORITY Uns fors have priority unsecured								
Part 1	List A	All of Your PRIORITY Uns			ont in a r ai					
Part 1 1. Do	List A	All of Your PRIORITY Uns			ortin a rai					
Part 1 1. Do 2. Listing po	List A o any credit No. Go to I Yes. St all of you entify what the ssible, list the	All of Your PRIORITY Uns	claims agai	has more than one prior y and nonpriority amount to the creditor's name. If y	rity unsecure is, list that cl you have mo	ed claim, lis laim here a	nd show both priori	y and nonpriori	ity amount	s. As much as
Part 1 1. Do 2. Liside po Part	List A p any credit No. Go to I Yes. St all of you entify what ty ssible, list that 1. If more	All of Your PRIORITY Unscors have priority unsecured Part 2. If priority unsecured claims. If a claim has be claims in alphabetical order	. If a creditor s both priority r according to ticular claim,	has more than one prior and nonpriority amount to the creditor's name. If y list the other creditors in	rity unsecure s, list that cl you have mo n Part 3.	ed claim, lis laim here a ore than tw	nd show both priori	y and nonpriori claims, fill out Priority	ity amount	s. As much as nuation Page of Nonpriority
Part 1 1. Do 2. Liside po Part	List A any credit No. Go to I Yes. st all of you entify what ty ssible, list the art 1. If more or an explan	All of Your PRIORITY Unscors have priority unsecured Part 2. If priority unsecured claims. When the claim it is. If a claim has the claims in alphabetical order than one creditor holds a part	If a creditor both priority according to ticular claim, be the instruc	has more than one prior and nonpriority amount to the creditor's name. If y list the other creditors in	rity unsecure is, list that cl you have mo n Part 3. instruction b	ed claim, lis laim here a ore than tw booklet.)	nd show both priori o priority unsecured	y and nonpriori claims, fill out Priority amount	ity amount	s. As much as nuation Page of
Part 1 1. Do 2. Listing port of the port	List A p any credit No. Go to I Yes. st all of you entify what ty ssible, list the art 1. If more or an explan Priority C	All of Your PRIORITY Unscors have priority unsecured Part 2. If priority unsecured claims, you of claim it is. If a claim has ne claims in alphabetical order than one creditor holds a part nation of each type of claim, se	If a creditor both priority according to ticular claim, see the instruction	has more than one prior and nonpriority amount to the creditor's name. If y list the other creditors in the ctions for this form in the	rity unsecure is, list that cl you have mo n Part 3. instruction b	ed claim, lis laim here a ore than tw booklet.)	nd show both priorit o priority unsecured Total claim	y and nonpriori claims, fill out Priority amount	ity amount the Contir	s. As much as nuation Page of Nonpriority amount
Part 1 1. Do 2. Listing port of the port	List A p any credit No. Go to I Yes. st all of you entify what ty ssible, list the art 1. If more or an explan Priority C PO BO	All of Your PRIORITY Unscors have priority unsecured Part 2. If priority unsecured claims, you of claim it is. If a claim has ne claims in alphabetical order than one creditor holds a part nation of each type of claim, se RTAMENTO DE HACIEI reditor's Name X 9024140	If a creditor both priority according to ticular claim, see the instruction	has more than one prior and nonpriority amount to the creditor's name. If y list the other creditors in the ctions for this form in the	rity unsecure is, list that cl you have mo n Part 3. instruction b	ed claim, lis laim here a ore than tw booklet.)	nd show both priorit o priority unsecured Total claim	y and nonpriori claims, fill out Priority amount	ity amount the Contir	s. As much as nuation Page of Nonpriority amount
Part 1 1. Do 2. Listing port of the port	List A p any credit No. Go to I Yes. st all of you entify what ty ssible, list th art 1. If more or an explan Priority C PO BO San Ju	All of Your PRIORITY Unscors have priority unsecured Part 2. If priority unsecured claims, you of claim it is. If a claim has ne claims in alphabetical order than one creditor holds a part nation of each type of claim, se	If a creditor both priority according to ticular claim, see the instruction	has more than one prior and nonpriority amount to the creditor's name. If y list the other creditors in the ctions for this form in the	rity unsecure is, list that cl you have mo n Part 3. instruction be nt number curred?	ed claim, lis laim here a ore than tw booklet.) 6685	nd show both priorit o priority unsecured Total claim \$1,885.5	y and nonpriori claims, fill out Priority amount	ity amount the Contir	s. As much as nuation Page of Nonpriority amount
Part 1 1. Do 2. Liside poor Part (For 2.1)	List A p any credit No. Go to I Yes. st all of you entify what ty ssible, list the art 1. If more or an explan Priority C PO BO San Ju Number S	All of Your PRIORITY Unscors have priority unsecured Part 2. If priority unsecured claims, type of claim it is. If a claim has be claims in alphabetical order than one creditor holds a part hation of each type of claim, see than the control of t	If a creditor both priority according to ticular claim, ee the instruction	has more than one prior and nonpriority amount to the creditor's name. If y list the other creditors in the ctions for this form in the	rity unsecure is, list that cl you have mo n Part 3. instruction be nt number curred?	ed claim, lis laim here a ore than tw booklet.) 6685	nd show both priorit o priority unsecured Total claim \$1,885.5	y and nonpriori claims, fill out Priority amount	ity amount the Contir	s. As much as nuation Page of Nonpriority amount
Part 1 1. Do 2. Lis ide po Part (Fe	List A p any credit No. Go to I Yes. st all of you entify what ty ssible, list the art 1. If more or an explan Priority C PO BO San Ju Number S	All of Your PRIORITY Unscors have priority unsecured Part 2. In priority unsecured claims. The claim is a claim has the claims in alphabetical order than one creditor holds a part that one deach type of claim, see that one deach type of claim, see that one are than one creditor holds a part that one creditor's Name X 9024140 an, PR 00902-4140 street City State ZIp Code and the debt? Check one.	If a creditor both priority according to ticular claim, see the instruction	has more than one prior and nonpriority amount to the creditor's name. If y list the other creditors in the ctions for this form in the Last 4 digits of accour When was the debt inc.	rity unsecure is, list that cl you have mo n Part 3. instruction be nt number curred?	ed claim, lis laim here a ore than tw booklet.) 6685	nd show both priorit o priority unsecured Total claim \$1,885.5	y and nonpriori claims, fill out Priority amount	ity amount the Contir	s. As much as nuation Page of Nonpriority amount
Part 1 1. Do 2. Listing idea poor part (For 2.1)	List A any credit No. Go to I Yes. st all of you entify what ty essible, list that 1. If more or an explan DEPAR Priority C PO BO San Ju Number S Who incurre	All of Your PRIORITY Unstors have priority unsecured Part 2. In priority unsecured claims, you of claim it is. If a claim has ne claims in alphabetical order than one creditor holds a part nation of each type of claim, see RTAMENTO DE HACIEI reditor's Name X 9024140 Israel City State ZIp Code and the debt? Check one.	If a creditor south priority according to ticular claim, ee the instruction	has more than one prior and nonpriority amount to the creditor's name. If you list the other creditors in the ctions for this form in the Last 4 digits of accour When was the debt incompared to the date you file, Contingent Unliquidated	rity unsecure is, list that cl you have mo n Part 3. instruction be nt number curred?	ed claim, lis laim here a ore than tw booklet.) 6685	nd show both priorit o priority unsecured Total claim \$1,885.5	y and nonpriori claims, fill out Priority amount	ity amount the Contir	s. As much as nuation Page of Nonpriority amount
Part 1 1. Do 2. Listide por Part (Feb. 2.1)	List A p any credit No. Go to I Yes. st all of you entify what ty essible, list the art 1. If more or an explan Priority C PO BO San Ju Number S Who incurred Debtor 1 Debtor 2	All of Your PRIORITY Unsors have priority unsecured Part 2. In priority unsecured claims. Appendix of claim it is. If a claim has the claims in alphabetical order to than one creditor holds a part that one creditor holds a part that one deach type of claim, see RTAMENTO DE HACIEI reditor's Name X 9024140 and PR 00902-4140 Street City State Zip Code and the debt? Check one.	If a creditor both priority according to ticular claim, ee the instruction	has more than one prior and nonpriority amount to the creditor's name. If y list the other creditors in the ctions for this form in the Last 4 digits of accour. When was the debt incomes as of the date you file, Contingent	rity unsecure is, list that cl you have mo n Part 3. instruction in nt number curred?	ed claim, lis laim here a ore than tw booklet.) 6685	nd show both priorit o priority unsecured Total claim \$1,885.5	y and nonpriori claims, fill out Priority amount	ity amount the Contir	s. As much as nuation Page of Nonpriority amount
2. Liside poper (Fo	List A p any credit No. Go to I Yes. st all of you entify what ty ssible, list the art 1. If more or an explan Priority C PO BO San Ju Number S Who incurred Debtor 1 Debtor 1	All of Your PRIORITY Unsors have priority unsecured Part 2. In priority unsecured claims, you of claim it is. If a claim has ne claims in alphabetical order than one creditor holds a part nation of each type of claim, se PRIORITY SHAPE IT AMENTO DE HACIE! reditor's Name X 9024140 Street City State ZIp Code and the debt? Check one. Only only and Debtor 2 only	If a creditor both priority according to ticular claim, the the instruction of the control of th	has more than one prior and nonpriority amount to the creditor's name. If y list the other creditors in the ctions for this form in the Last 4 digits of accour. When was the debt income as of the date you file, Contingent Unliquidated Disputed	rity unsecure is, list that cl you have mo n Part 3. instruction b nt number curred? , the claim i	ed claim, lis laim here a ore than tw booklet.) 6685	nd show both priorit o priority unsecured Total claim \$1,885.5	y and nonpriori claims, fill out Priority amount	ity amount the Contir	s. As much as nuation Page of Nonpriority amount
Part 1 1. Do 2. Listing population (For 2.1)	List A p any credit No. Go to I Yes. st all of you entify what ty ssible, list th art 1. If more or an explan Priority C PO BO San Ju Number S Who incurre Debtor 1 Debtor 1 At least o	All of Your PRIORITY Unsors have priority unsecured Part 2. In priority unsecured claims, you of claim it is. If a claim has ne claims in alphabetical order than one creditor holds a part nation of each type of claim, see RTAMENTO DE HACIEI reditor's Name X 9024140 Street City State Zip Code and the debt? Check one. Only only and Debtor 2 only one of the debtors and another	If a creditor south priority according to ticular claim, ee the instruction NDA	has more than one prior and nonpriority amount to the creditor's name. If you list the other creditors in the ctions for this form in the Last 4 digits of accour When was the debt incompared to the contingent Unliquidated Disputed Type of PRIORITY uns Domestic support ob	rity unsecure is, list that cl you have mo n Part 3. instruction b nt number curred? the claim i	ed claim, lis laim here a core than two booklet.) 6685 is: Check a	nd show both priorit o priority unsecured Total claim \$1,885.8	y and nonpriori claims, fill out Priority amount	ity amount the Contir	s. As much as nuation Page of Nonpriority amount
Part 1 1. Do 2. Listide por Part (Feb. 2.1)	List A p any credit No. Go to I Yes. st all of you entify what ty essible, list th art 1. If more or an explan DEPAR Priority C PO BO San Ju Number S Who incurre Debtor 1 Debtor 2 Debtor 1 At least o Check if	All of Your PRIORITY Unsors have priority unsecured Part 2. In priority unsecured claims, you of claim it is. If a claim has ne claims in alphabetical order than one creditor holds a part nation of each type of claim, se PRIORITY SHAPE IT AMENTO DE HACIE! reditor's Name X 9024140 Street City State ZIp Code and the debt? Check one. Only only and Debtor 2 only	If a creditor both priority according to ticular claim, see the instruction NDA	has more than one prior and nonpriority amount to the creditor's name. If y list the other creditors in the ctions for this form in the Last 4 digits of accour When was the debt incompared to Contingent Unliquidated Disputed	rity unsecure is, list that cl you have mo n Part 3. instruction in nt number curred? , the claim in secured claim oligations ther debts you	ed claim, lis laim here a ore than two booklet.) 6685 is: Check a lim:	nd show both priorit o priority unsecured Total claim \$1,885.5	y and nonpriori claims, fill out Priority amount	ity amount the Contir	s. As much as nuation Page of Nonpriority amount
Part 1 1. Do 2. Lis ide po Pa (Fe	List A p any credit No. Go to I Yes. st all of you entify what ty essible, list th art 1. If more or an explan DEPAR Priority C PO BO San Ju Number S Who incurre Debtor 1 Debtor 2 Debtor 1 At least o Check if	All of Your PRIORITY Unsors have priority unsecured Part 2. In priority unsecured claims, ype of claim it is. If a claim has ne claims in alphabetical order than one creditor holds a part nation of each type of claim, see RTAMENTO DE HACIEI reditor's Name X 9024140 Street City State ZIp Code and the debt? Check one. only only and Debtor 2 only one of the debtors and another this claim is for a community.	If a creditor both priority according to ticular claim, see the instruction NDA	has more than one prior and nonpriority amount to the creditor's name. If y list the other creditors in the ctions for this form in the Last 4 digits of accour When was the debt incompared to the contingent Unliquidated Disputed Type of PRIORITY uns Domestic support ob Taxes and certain ot	rity unsecure is, list that cl you have mo n Part 3. instruction in nt number curred? , the claim in secured claim oligations ther debts you	ed claim, lis laim here a ore than two booklet.) 6685 is: Check a lim:	nd show both priorit o priority unsecured Total claim \$1,885.5	y and nonpriori claims, fill out Priority amount	ity amount the Contir	s. As much as nuation Page of Nonpriority amount

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Deb	tor 1 ELIEZER REYES CASTRO	——————	Case nu	imber (if know)		
2.2	INTERNAL REVENUE BUREAU	Last 4 digits of account number	6685	\$6,552.53	\$0.00	\$6,552.53
	Priority Creditor's Name VIBIR 6115 EST SMITH BAY STE 225 St Thomas, VI 00802	When was the debt incurred?	2008			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all t	that apply		
	Who incurred the debt? Check one.	☐ Contingent				
	■ Debtor 1 only	☐ Unliquidated				
	Debtor 2 only	☐ Disputed				
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:			
	☐ At least one of the debtors and another	☐ Domestic support obligations				
	☐ Check if this claim is for a community debt	Taxes and certain other debts y	ou owe the go	overnment		
	Is the claim subject to offset?	☐ Claims for death or personal inj	ury while you	were intoxicated		
	■ No	Other. Specify				
	Yes	SOCIAL SE	CURITY			
Par	2: List All of Your NONPRIORITY Unsecu	rod Claims				
3	Do any creditors have nonpriority unsecured claims					
	□ No. You have nothing to report in this part. Submit t		obodulos			
		riis form to trie court with your other s	criedules.			
	Yes.					
	List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each clathan one creditor holds a particular claim, list the other Part 2.	aim. For each claim listed, identify wh	at type of clai	m it is. Do not list claims al	ready included in F	art 1. If more
					Total cl	aim
4.1	BEST BUY	Last 4 digits of account numb	er 7597			\$886.45
	Nonpriority Creditor's Name PO BOX 78009 Phoenix, AZ 85062	When was the debt incurred?	2017			
	Number Street City State Zlp Code	As of the date you file, the cla	im is: Check a	all that apply		
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsect	ıred claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a s report as priority claims	eparation agre	eement or divorce that you	did not	
	No	Debts to pension or profit-sh	aring plans, ai	nd other similar debts		
	☐ Yes	Other. Specify CREDIT	• • •			
	— 163	Other. Specify	CAIND I OI	10.1710EU		

Page 22 of 62 Case number (if know) Document Debtor 1 ELIEZER REYES CASTRO 4.2 \$13,774.10 **CHASE** Last 4 digits of account number 2129 Nonpriority Creditor's Name PO BOX 15123 When was the debt incurred? 2017 Wilmington, DE 19850 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify CREDIT CARD PURCHASES ☐ Yes 4.3 CITI Last 4 digits of account number 0518 \$13,471.06 Nonpriority Creditor's Name PO BOX 6004 When was the debt incurred? 2017 Sioux Falls. SD 57117-6004 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **CREDIT CARD PURCHASES** 4.4 **MACYS** Last 4 digits of account number 7531 \$2,032.81 Nonpriority Creditor's Name PO BOX 78008 When was the debt incurred? 2017 Phoenix, AZ 85062-8008 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent

Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify CREDIT CARD PURCHASES ☐ Yes

Debtor 1 ELIEZER REYES CASTRO

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Case number (if know)

4.5	ORIENTAL BANK	Last 4 digits of account number	\$44,787.38
	Nonpriority Creditor's Name PO BOX 364746	When was the debt incurred? 2015	
	San Juan, PR 00936-4746 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	<u> </u>		
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	□ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify PERSONAL LOAN	
	Li res	Other. Specify PERSONAL LOAN	
4.6	PAYPAL CREDIT	Last 4 digits of account number 7404	\$10,239.32
	Nonpriority Creditor's Name PO BOX 105658 Atlanta, GA 30348	When was the debt incurred? 2017	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify	
4.7	PEN FED CREDIT UNION	Last 4 digits of account number 4388	\$2,959.99
	Nonpriority Creditor's Name PO BOX 247080 Omaha, NE 68124-7080	When was the debt incurred? 2017	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify VISA CREDIT CARD PURCHASES	

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debt

■ No

☐ Yes

Type of NONPRIORITY unsecured claim:

☐ Obligations arising out of a separation agreement or divorce that you did not

■ Other. Specify CREDIT PURCHASES AT ROOMS TO GO

Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

report as priority claims

☐ At least one of the debtors and another

Is the claim subject to offset?

☐ Check if this claim is for a community

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Nonpriority Creditor's Name PO BOX 960090 Orlando, FL 32896 Number Street City State Zlp Code Who incurred the debt? Check one.	When was the debt incurred? 2017 As of the date you file, the claim is: Check all that apply	
Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only	As of the date you file, the claim is: Check all that apply	
_		
_	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify CREDIT CARD PURCHASES AT JC PENNEY	
WYNDHAM	Last 4 digits of account number 6685	\$23,0
Nonpriority Creditor's Name 6277 SEA HARBOR Orlando, FL 32821	When was the debt incurred? 2017	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify TIME SHARE	

notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 8,438.12
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 8,438.12
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$

Official Form 106 E/F

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Debtor 1 ELIEZER REYES CASTRO

0.00 Other. Add all other nonpriority unsecured claims. Write that amount 128,004.80 Total Nonpriority. Add lines 6f through 6i. 6j. 128,004.80 Case:18-01084-ESL7 Doc#:1 Filed:02/28/18 Entered:02/28/18 18:34:33 Desc: Main Document Page 27 of 62

Fill in this infor	mation to identify your	case:			
Debtor 1	ELIEZER REYES	CASTRO			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF PUERTO	RICO		
Case number					
(if known)				☐ Check if this amended fil	

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Р	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	POPULAR AUTO PO BOX 15011 San Juan, PR 00902-8511	VEHICLE LEASE 2015 MERCEDES BENZ \$866 MONT TO MONT SINCE 2016 TO PRESENT MATURITY DATE 2021 DEBTORS ASSUMES THIS VEHICLE LEASE
2.2	WYNDHAM 6277 SEA HARBOR Orlando, FL 32821	TIME SHARE DEBTOR REJECT TIME SHARE CONTRACT WITH WYNDHAM.

		Docume	ent Page 28 d	of 62	
Fill in this	information to identify your	case:			
Debtor 1	ELIEZER REYES	CASTRO			
Debior	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, fili	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	DISTRICT OF PUERTO	RICO		
Case num	ber				
(if known)					☐ Check if this is an
					amended filing
O((; ·	15 40011				
	l Form 106H				
Sched	lule H: Your Cod	ebtors			12/15
1. Do	you have any codebtors? (If	you are filing a joint case, o	do not list either spouse	as a codebtor.	
■ No □ Yes					
	hin the last 8 years, have yona, California, Idaho, Louisiana				states and territories include
	, , ,	, ,	, ,	,	
	. Go to line 3.				
⊔ Yes	s. Did your spouse, former spo	use, or legal equivalent live	with you at the time?		
in line Form	e 2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	sure you have listed the	with you. List the person shown creditor on Schedule D (Official chedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and 2	IP Code		Column 2: The credi	tor to whom you owe the debt that apply:
3.1				☐ Schedule D, line	
	Name			□ Schedule E/F, line	
				☐ Schedule G, line	
-	Normalis and Other of				
	Number Street City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			Schedule E/F, line	
				☐ Schedule G, line	,
-	Number Street				
	City	State	ZIP Code		

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Fill	in this information to identify your o	2250.							
	, ,	EYES CASTRO							
	otor 2				_				
Uni	ted States Bankruptcy Court for the	e: DISTRICT OF PUERT	O RICO		_				
	se number nown)					Check if this is: An amende A suppleme	nt showin	g postpetition	chapter
O.	fficial Form 106l					MM / DD/ Y		ollowing date.	
	chedule I: Your Inc	ome				IVIIVI / DD/ T			12/15
sup spo atta	as complete and accurate as pos plying correct information. If you use. If you are separated and you ch a separate sheet to this form. tt:	are married and not filir ur spouse is not filing wi On the top of any addition	ng jointly, and your th you, do not inclu	spouse i	s livi natio	ng with you, incluen about your spo	ide inforn use. If mo	nation about ore space is i	your needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-fi	ling spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed □ Not employed			☐ Emplo	•		
	employers.	Occupation	GROUP MANAG	GER					
	Include part-time, seasonal, or self-employed work.	Employer's name	PREFERRED M						
	Occupation may include student or homemaker, if it applies.	Employer's address	San Juan, PR 00918						
				0310					
Par	t 2: Give Details About Mo	How long employed the nthly income	nere? <u>7 YRS.</u>						
Esti spou	mate monthly income as of the cuse unless you are separated.	late you file this form. If y	· · ·					·	J
	u or your non-filing spouse have m e space, attach a separate sheet to		embine the information	n for all e	mplo	yers for that perso	n on the li	nes below. If y	ou need
					_	For Debtor 1		btor 2 or ng spouse	
2.	List monthly gross wages, sale deductions). If not paid monthly,			2.	\$	2,991.00	\$	N/A	
3.	Estimate and list monthly over	time pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$	2,991.00	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

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Deb	or 1	ELIEZER REYES CASTRO		Case	number (<i>if known</i>)			
				For	Debtor 1	For De	ebtor 2 or	
	_						ling spouse	
	Copy	y line 4 here	4.	\$	2,991.00	\$	N/A	_
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	529.00	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	_
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	
	5e.	Insurance	5e.	\$	0.00	\$	N/A	_
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	_
	5g.	Union dues	5g.	\$	0.00	\$	N/A	_
	5h.	Other deductions. Specify:	5h.+	\$	0.00	+ \$	N/A	<u>. </u>
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	529.00	\$	N/A	_
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,462.00	\$	N/A	_
8.		all other income regularly received:						
	8a.	Net income from rental property and from operating a business, profession, or farm						
		Attach a statement for each property and business showing gross						
		receipts, ordinary and necessary business expenses, and the total		•		•		
	O.L.	monthly net income.	8a.	\$_	262.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependen regularly receive	ıt					
		Include alimony, spousal support, child support, maintenance, divorce						
		settlement, and property settlement.	8c.	\$	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A	_
	8e.	Social Security	8e.	\$	0.00	\$	N/A	_
	8f.	Other government assistance that you regularly receive						
		Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental	Je					
		Nutrition Assistance Program) or housing subsidies.						
		Specify:	8f.	\$	0.00	\$	N/A	_
	8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A	_
	8h.	Other monthly income. Specify: VETERAN'S COMPENSATION	8h.+	\$	654.12	+ \$	N/A	<u>-</u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	916.12	\$	N/A	Δ
٠.	,	2 e	ا		310.12			
10.	Calc	ulate monthly income. Add line 7 + line 9.	10. \$		3,378.12 + \$		N/A = \$	3,378.12
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	, T.		-			0,010112
11		e all other regular contributions to the expenses that you list in <i>Schedul</i>	 a_					-
11.		de contributions from an unmarried partner, members of your household, you		dents.	your roommates	, and		
		friends or relatives.	·	-	•			
		ot include any amounts already included in lines 2-10 or amounts that are no	t availab	le to p	ay expenses list	ed in <i>Sch</i>	_	0.00
	Spec	any					11. +\$	0.00
12.	Add	the amount in the last column of line 10 to the amount in line 11. The re	esult is th	e com	bined monthly in	come.		
		that amount on the Summary of Schedules and Statistical Summary of Certa						2 270 42
	appli	es					12. \$	3,378.12
							Combi	ned
	_		_				monthl	ly income
13.	Do A	ou expect an increase or decrease within the year after you file this form	n?					
		No.						
		Yes. Explain:						

Official Form 106I Schedule I: Your Income page 2

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	in this informati	Cara ta Salara (Grace								
FIII	in this informat	tion to identify yo	our case:							
Deb	tor 1	ELIEZER RE	YES CAS	STRO				if this is:		
Deb	tor 2							n amended filing	ving postpetition cha	ntor
	ouse, if filing)							3 expenses as of t		ipiei
			DIOTOL	0T 0F DUEDTO DI00			_			
Unit	ed States Bankrı	uptcy Court for the	: DISTRI	CT OF PUERTO RICO			N	IM / DD / YYYY		
l	e number nown)									
Of	fficial Fo	rm 106J								
So	chedule	J: Your	Exper	ises						12/15
Be info	as complete a ormation. If mo mber (if knowi	and accurate as ore space is ne n). Answer eve	s possible eded, atta ry questio	. If two married people a ch another sheet to this						
Par 1.	t 1: Descri	ibe Your House	hold							
١.	_									
	■ No. Go to		in a aanar	ata hawaahald?						
			ın a separ	ate household?						
			et file Offici	al Form 106J-2, Expenses	o for Congreto House	hold of D	ohto	ır O		
	<u></u> п	es. Debiol 2 mus	st lile Offici	airoilli 1005-2, Experises	s for Separate Flouse	illola oi D	ebio	1 2.		
2.	Do you have	e dependents?	■ No							
	Do not list De Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor			Dependent's age	Does dependent live with you?	
	Do not state	the							□ No	
	dependents r	names.							☐ Yes	
									□ No	
									☐ Yes	
									□ No	
									☐ Yes	
									□ No □ Yes	
3.		enses include		No					Li res	
	yourself and	people other to your depende	nts? ⊔	Yes						
Par		ate Your Ongoi		ly Expenses uptcy filing date unless y	ou are using this fo	orm as a	cun	plomont in a Cha	ntor 12 case to ren	ort
exp				y is filed. If this is a supp						
				government assistance i						
			d have inc	cluded it on Schedule I:	Your Income			Your expe	enses	
(OII	ficial Form 10	oi. <i>)</i>						тош охро		
4.		r home owners d any rent for th		ses for your residence. I or lot.	nclude first mortgage		\$		839.00	
	If not include	ed in line 4:								
	4a. Real e	state taxes				4a.	\$		0.00	
		rty, homeowner's	s, or renter	's insurance		4a. 4b.			0.00	
		•		upkeep expenses		4c.			75.00	
		owner's associat				4d.			0.00	
5.	Additional n	nortgage payme	ents for yo	our residence, such as ho	me equity loans	5.	\$		0.00	

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Deb	tor 1 ELIEZER REYES CASTRO	Case num	ber (if known)	
6.	Utilities:			
•	6a. Electricity, heat, natural gas	6a.	\$	75.00
	6b. Water, sewer, garbage collection	6b.	\$	40.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	200.00
	6d. Other. Specify: GAS	6d.	\$	8.00
7.	Food and housekeeping supplies	7.	\$	275.00
8.	Childcare and children's education costs	8.	\$	0.00
9.	Clothing, laundry, and dry cleaning	9.		75.00
10.	Personal care products and services	10.	\$	75.00
11.	Medical and dental expenses	11.	\$	125.00
12.	Transportation. Include gas, maintenance, bus or train fare.		·	
	Do not include car payments.	12.	\$	300.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	75.00
14.	Charitable contributions and religious donations	14.	\$	186.00
15.	Insurance.		-	
	Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	*	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	·	33.00
	15d. Other insurance. Specify: CANCER INSURANCE	15d.	\$	65.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
17.	Installment or lease payments:		-	
	17a. Car payments for Vehicle 1	17a.	·	866.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify: ALARM	17c.	\$	56.00
	17d. Other. Specify:	17d.	\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		\$	0.00
19.	Other payments you make to support others who do not live with you.		\$	100.00
	Specify: FAMILY HELP TO PARTNER AND SISTER	19.		
20.	Other real property expenses not included in lines 4 or 5 of this form or on Sch			
	20a. Mortgages on other property	20a.		0.00
	20b. Real estate taxes	20b.		0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues	20e.	\$	0.00
21.	Other: Specify: CONTINUED EDUCATION REQUIREMENT	21.	+\$	84.00
20				
22.	Calculate your monthly expenses 22a. Add lines 4 through 21.		\$	2 550 00
	ŭ		· -	3,552.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	3,552.00
23.	Calculate your monthly net income.		•	
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,378.12
	23b. Copy your monthly expenses from line 22c above.	23b.	-\$	3,552.00
				<u> </u>
	23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	-173.88
24.				ease or decrease because of a

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Fill in this infor	mation to identify your	case:			
Debtor 1					
Debior	ELIEZER REYES First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF PUERTO R	ICO		
Case number					
(if known)					Check if this is an amended filing
If two married p You must file th obtaining mone	eople are filing together	n connection with a bankru	ible for supplying corr		
Sig	ın Below				
Did you pa	ay or agree to pay some	one who is NOT an attorne	y to help you fill out b	ankruptcy forms?	
■ No					
☐ Yes.	Name of person				tition Preparer's Notice, ature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the summa	ary and schedules file	d with this declaration and	
X /s/ ELI	IEZER REYES CASTR	RO	X		
	ER REYES CASTRO ure of Debtor 1		Signature of	Debtor 2	
Date	February 28, 2018		Date		

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Fil	I in this inform	nation to identify you	case:			
		ELIEZER REYES				
De	btor 1	First Name	Middle Name	Last Name		
	btor 2 ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Bar	nkruptcy Court for the:	DISTRICT OF PUERTO I	RICO		
	se number				_	Check if this is an mended filing
St Be info	as complete a	of Financial	attach a separate sheet to	re filing together, both are	cankruptcy equally responsible for sup y additional pages, write you	
Pa	rt 1: Give D	etails About Your Ma	rital Status and Where You	Lived Before		
1.	What is your	current marital statu	s?			
	☐ Married■ Not mar	ried				
2.	During the la	st 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	t all of the places you li	ived in the last 3 years. Do no	ot include where you live now	ı.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	ldress:	Dates Debtor 2 lived there
3. stat					ity property state or territory	
	■ No □ Yes. Ma	ke sure you fill out <i>Sch</i>	nedule H: Your Codebtors (Of	fficial Form 106H).		
Pa	rt 2 Explai	n the Sources of You	r Income			
4.	Fill in the tota	I amount of income you	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part		ndar years?
	□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$1,256.00	☐ Wages, commissions, bonuses, tips	
			Operating a business		☐ Operating a business	

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Case number (if known)

Debtor 1 ELIEZER REYES CASTRO

					Dalitand		D-14 0	
					Debtor 1		Debtor 2	
					Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2017)		31, 2017)	■ Wages, commissions, bonuses, tips	· · · · · · · · · · · · · · · · · · ·				
					Operating a business		☐ Operating a business	
			dar year be December		■ Wages, commissions, bonuses, tips	\$113,698.00	☐ Wages, commissions, bonuses, tips	
					■ Operating a business		☐ Operating a business	
	and winn	other nings. each s	public bene If you are fil	fit payments; ing a joint cas the gross inco	pensions; rental income; inte ee and you have income that		•	
	-	165.	riii iii tile de	etalis.				
					Debtor 1	Ouese in serve from	Debtor 2	Onese income
					Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
			/ 1 of curre filed for ba	nt year until nkruptcy:	Veteran's compensation	\$1,308.24		
			dar year: December	31, 2017)	Veteran's compensation	\$7,849.44		
			dar year be December		Veteran's compensation	\$7,849.44		
Par	t 3:	l iei	Cortain Pa	yments You	Made Before You Filed for	Rankruntev		
						• •		
6.	Are	eithei No.	Neither D	ebtor 1 nor D	's debts primarily consume bebtor 2 has primarily consi personal, family, or househo	umer debts. Consumer debts	are defined in 11 U.S.C. § 10	1(8) as "incurred by an
			During the	90 days befo	re you filed for bankruptcy, d	id you pay any creditor a total	of \$6,425* or more?	
			□ No.	Go to line 7				
			☐ Yes	paid that cre not include	editor. Do not include paymer payments to an attorney for t	nts for domestic support obligation his bankruptcy case.	n one or more payments and that it ations, such as child support a	nd alimony. Also, do
			* Subject	to adjustment	t on 4/01/19 and every 3 year	s after that for cases filed on	or after the date of adjustment	

Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

□ Yes

List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

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Debtor 1 **ELIEZER REYES CASTRO**

Creditor's Name and Address Dates of payment **Total amount** Amount you Was this payment for ... still owe paid Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Nο Yes. List all payments to an insider. Insider's Name and Address Dates of payment **Total amount** Amount you Reason for this payment paid still owe Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Dates of payment **Total amount** Amount you Reason for this payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Date Value of the property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No

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Case number (if known)

Debtor 1 ELIEZER REYES CASTRO

Pa	tt 5: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankruptcy ■ No □ Yes. Fill in the details for each gift.	, did you give any gifts with a total value of more t	han \$600 per person'	?
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	Within 2 years before you filed for bankruptcy ■ No □ Yes. Fill in the details for each gift or contribution	, did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value
Pa	rt 6: List Certain Losses			
15.	Within 1 year before you filed for bankruptcy or gambling? ■ No □ Yes. Fill in the details.	or since you filed for bankruptcy, did you lose any	thing because of thef	t, fire, other disaster,
	how the loss occurred Include	cribe any insurance coverage for the loss de the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Pa	rt 7: List Certain Payments or Transfers			
16.	Within 1 year before you filed for bankruptcy, consulted about seeking bankruptcy or prepa	did you or anyone else acting on your behalf pay or ring a bankruptcy petition? ers, or credit counseling agencies for services require		rty to anyone you
	□ No■ Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	RAMON F. LOPEZ LAW OFFICES, P.S.C. PO BOX 34173 Fort Buchanan, PR 00934	Attorney Fees		\$1,200.00
17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you li		or transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.			
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment

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Debtor 1 ELIEZER REYES CASTRO

	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.								
	Person Who Received Transfer Address	Description and v property transfer		paymo	ibe any property or ents received or debts n exchange	Date transfer was made			
	Person's relationship to you Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pr ■ No □ Yes. Fill in the details.		y property to a s	self-settle	d trust or similar device	e of which you are a			
	Name of trust Description and value of the property transferred				sferred	Date Transfer was			
						made			
Par	List of Certain Financial Accounts, In	struments, Safe Deposit	t Boxes, and Sto	rage Unit	:S				
	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso No Yes. Fill in the details.	or other financial accou	nts; certificates	of deposi					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument		Date account was closed, sold, moved, or transferred	Last balance before closing or transfer			
	FIRST BANK PO BOX 5678 San Juan, PR 00908	xxxx-6819	■ Checking □ Savings □ Money Mark □ Brokerage □ Other	Savings Money Market Brokerage		\$2,500.00			
	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed for	bankruptcy, an	y safe de _l	posit box or other depo	sitory for securities,			
	NoYes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?			
22.	Have you stored property in a storage unit	or place other than your	home within 1 y	year befoi	re you filed for bankrup	tcy?			
	■ No								
	Yes. Fill in the details.			_		_			
	me of Storage Facility Idress (Number, Street, City, State and ZIP Code) Who else has or had acc to it? Address (Number, Street, City State and ZIP Code)				the contents	Do you still have it?			

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Debtor 1 ELIEZER REYES CASTRO

Pa	t 9: Identify Property You Hold or Control for	Someone Else							
23.	Do you hold or control any property that some for someone.	one else owns? Include any prop	erty y	ou borrowed from, are storing for	, or hold in trust				
	■ No □ Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	De	escribe the property	Value				
Pai	t 10: Give Details About Environmental Inform	ation							
For	the purpose of Part 10, the following definitions	apply:							
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	air, land, soil, surface water, grou	_	• •					
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal		al law	, whether you now own, operate, o	or utilize it or used				
	Hazardous material means anything an enviror hazardous material, pollutant, contaminant, or	nmental law defines as a hazardo	us wa	aste, hazardous substance, toxic s	ubstance,				
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of wh	en th	ey occurred.					
24.	Has any governmental unit notified you that yo	u may be liable or potentially liab	le un	der or in violation of an environme	ental law?				
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State & ZIP Code)	and	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of any	release of hazardous material?							
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State & ZIP Code)	and	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or admini	strative proceeding under any en	viron	mental law? Include settlements a	nd orders.				
	■ No □ Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ature of the case	Status of the case				
Pai	t 11: Give Details About Your Business or Cor	nnections to Any Business							
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have	any o	f the following connections to any	business?				
	■ A sole proprietor or self-employed in a	trade, profession, or other activit	y, eitl	her full-time or part-time					
	☐ A member of a limited liability company	(LLC) or limited liability partners	ship (LLP)					
	☐ A partner in a partnership								
	☐ An officer, director, or managing executive of a corporation								

☐ An owner of at least 5% of the voting or equity securities of a corporation

Case:18-01084-ESL7 Doc#:1 Filed:02/28/18 Entered:02/28/18 18:34:33 Desc: Main Page 40 of 62 Case number (if known) Document Debtor 1 ELIEZER REYES CASTRO ■ No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Business Name Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed **ELIEZER REYES CASTRO REAL ESTATE BROKER** EIN: **BO MONTONES II** From-To 2015 TO PRESENT **SECT. TIERRA LINDA** Las Piedras, PR 00771 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ ELIEZER REYES CASTRO Signature of Debtor 2 **ELIEZER REYES CASTRO** Signature of Debtor 1 Date February 28, 2018 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this infor	mation to identify your	case:				
Debtor 1	First Name	Middle Name		Last Name	-	
Debtor 2	First Name	Malalla Nassa		LastNama		
(Spouse if, filing)	First Name	Middle Name		Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF PU	IERTO RICO			
Case number _						- Observation to the second
(II KNOWN)						Check if this is an amended filing
Official Fo		n for Indiv	viduals	Filing Under Cha	apter 7	12/15
creditors hav you have leas You must file thi whiche	ever is earlier, unless th	our property, or and the lease has n vithin 30 days after	ot expired. you file you	m if: r bankruptcy petition or by the c use. You must also send copie		
sign ar Be as complete write y	eople are filing togethe nd date the form.	ole. If more space is mber (if known).	•	ly responsible for supplying co		
-			v. Craditara V	Mha Haya Claima Sacurad by D	romorty (Offic	ial Farm 106D) fill in the
information be	elow.			Who Have Claims Secured by Pr		·
Identify the cr	editor and the property t	hat is collateral	What do y secures a	ou intend to do with the proper debt?		Did you claim the property as exempt on Schedule C?
Creditor's E	BANCO POPULAR			der the property. the property and redeem it.	ļ	No
Description of	BO MONTONES II	SECT TIEDDA	☐ Retain	the property and enter into a	1	☐ Yes
property	LINDA CARR 919	KM 5.1 Las	_	mation Agreement. the property and [explain]:		
securing debt:	Piedras, PR 00771 County 2383.54 SQ. METE A CONCRETE STF WITH LVING AND ROOMS, 3 BEDRO BATHS, KITCHEN	R LOT WITH RUCTURE DINNING DOMS, 3				
	AND BALCONY. (EXPENSES)		CONTRA	I AND PAY PURSUANT CT		
	PENTAGON FEDERA JNION	L CREDIT		der the property. the property and redeem it.		■ No
Description of	2014 FORD ESCA NOT IN DEBTOR'S POSSESSION			the property and enter into a mation Agreement.	1	□ Yes

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 ELIEZE	R REYES CASTRO	Case number (if known)
	PAID BY A THIRD PARTY PAID BY A THIRD PARTY	■ Retain the property and [explain]: Paid by a third party.	_
name:	ULAR AUTO 015 MERCEDES BENZ C300	 ☐ Surrender the property. ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement. 	■ No □ Yes
property securing debt:		Retain the property and [explain]: RETAIN AND PAY PURSUANT CONTRACT	_
For any unexpired p in the information be	elow. Do not list real estate leases.	es ed in Schedule G: Executory Contracts and Unexpir Unexpired leases are leases that are still in effect; th if the trustee does not assume it. 11 U.S.C. § 365(p)	e lease period has not yet ended.
Describe your unex	pired personal property leases		Will the lease be assumed?
Lessor's name:	POPULAR AUTO		□ No
			■ Yes
Description of leased Property:	VEHICLE LEASE 2015 MERCEDES BENZ \$866 MONT TO MONT SINCE 2016 TO PRESENT MATURITY DATE 2021 DEBTORS ASSUMES THIS V	EHICLE LEASE	
Lessor's name:	WYNDHAM		■ No
			☐ Yes
Description of leased Property:		RE CONTRACT WITH WYNDHAM.	
Part 3: Sign Belo	w		
	rjury, I declare that I have indicated ject to an unexpired lease.	my intention about any property of my estate that se	ecures a debt and any personal
	REYES CASTRO	x	
ELIEZER RES	YES CASTRO ebtor 1	Signature of Debtor 2	
Date Febr	uarv 28. 2018	Date	

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Fill in this infor	mation to identify your case:		Chec	k one box only as di	rected in this form and	l in Form
Debtor 1	ELIEZER REYES CASTRO		122A	-1Supp:		
Debtor 2 (Spouse, if filing)				1. There is no presu	umption of abuse	
United States	Bankruptcy Court for the: District of Puerl	o Rico	-	applies will be m	o determine if a presur	•
Case number (if known)				3. The Means Test	cial Form 122A-2). does not apply now be service but it could ap	
			L		•	piy iater.
Official F	orm 122A - 1		_	Check if this is a	n amended ming	
	7 Statement of Your C	urrent Monthly	Inco	ma		12/15
Chapter	7 Statement of Tour C	THE HE WIGHTING		, iiie		12/13
attach a separat case number (if qualifying milita	and accurate as possible. If two married peop e sheet to this form. Include the line number t known). If you believe that you are exempted ry service, complete and file Statement of Exe alculate Your Current Monthly Income	o which the additional informa from a presumption of abuse b	ition apposed	olies. On the top of an you do not have prin	ny additional pages, writ narily consumer debts o	e your name and r because of
	<u> </u>	anlı				
	your marital and filing status? Check one	only.				
_	arried. Fill out Column A, lines 2-11. ed and your spouse is filing with you. Fil	Lout both Columns A and R	linos 2	11		
_	ed and your spouse is NOT filing with you	•		11.		
_	ing in the same household and are not le	• •		mns A and B. lines 2	<u>!-11.</u>	
	ing separately or are legally separated. F	• • •		•		ı declare under
pe	nalty of perjury that you and your spouse an ng apart for reasons that do not include eva	e legally separated under no	nbankr	uptcy law that applie	es or that you and your	
101(10A). Fo the 6 months	erage monthly income that you received from r example, if you are filing on September 15, the add the income for all 6 months and divide the to the same rental property, put the income from the	6-month period would be March option to the following the	1 through include	n August 31. If the amo any income amount mo	unt of your monthly incompre than once. For examp	ne varied during le, if both
				Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
	ss wages, salary, tips, bonuses, overtimeductions).	e, and commissions (befor	e all \$	3,569.87	\$	
. ,	and maintenance payments. Do not inclu	de payments from a spouse	if	<u> </u>	Ψ	
Column E	B is filled in.	. ,	\$	0.00	\$	
of you or from an u and room	Ints from any source which are regularly your dependents, including child suppoinmarried partner, members of your housel mates. Include regular contributions from a	ort. Include regular contributi old, your dependents, paren spouse only if Column B is i	ions ts,	0.00	\$	
	Do not include payments you listed on line 3 me from operating a business, profession		Ф		Φ	
J. Net IIICO	me from operating a business, profession	Debtor 1				
Gross red	ceipts (before all deductions)	392.50				
Ordinary	and necessary operating expenses	\$ 130.00				
	hly income from a business, n, or farm	\$ 262.50 Co	py re -> \$	262.50	\$	
6. Net inco	me from rental and other real property	Dobtor 4				
Grass ra	points (hoforo all dodustions)	Debtor 1 \$ 0.00				
	ceipts (before all deductions) and necessary operating expenses	-\$ 0.00				
•	hly income from rental or other real propert	0.00	ere -> \$	0.00	\$	
	dividends and royalties	· · · <u></u>	\$	0.00	\$	

7. Interest, dividends, and royalties

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Debtor 1 ELIEZER REYES CASTRO Case number (if known)

					Column A Debtor 1		Column B Debtor 2 or non-filing s		
8.	Unemployment compensation			\$		0.00	\$		
	Do not enter the amount if you contend that the amount he Social Security Act. Instead, list it here:	t received was a benef	it under						
	For you\$	0.	00						
	For your spouse \$	·							
	Pension or retirement income. Do not include any an benefit under the Social Security Act.			\$	i	0.00	\$		
10.	Income from all other sources not listed above. Spe Do not include any benefits received under the Social S received as a victim of a war crime, a crime against hur domestic terrorism. If necessary, list other sources on a total below.	Security Act or paymen manity, or international	ts or	¢		654.00	¢		
	VETERAN'S COMPENSATION			Φ	<u>'</u>	654.00	\$		
	Total amounts from separate pages, if any.			\$	<u>'</u>	0.00	\$		
	rotai amounts from separate pages, ii any.			Φ	<u> </u>	0.00	Φ		
11.	Calculate your total current monthly income. Add lir each column. Then add the total for Column A to the to		\$	4,4	486.37	+ -		= \$	4,486.37
									urrent monthly
Part	2: Determine Whether the Means Test Applies t	o You						incom	e
12.	Calculate your current monthly income for the year	. Follow these steps:							
	12a. Copy your total current monthly income from line	11			Cop	y line 11 l	nere=>	\$	4,486.37
	Multiply by 12 (the number of months in a year)							X ^	12
	12b. The result is your annual income for this part of th	e form					12b.	· [\$	53,836.44
13.	Calculate the median family income that applies to	you. Follow these step	os:						
	Fill in the state in which you live.	PR							
	Fill in the number of people in your household.	1							
	Fill in the median family income for your state and size						13.	\$	23,945.00
	To find a list of applicable median income amounts, go for this form. This list may also be available at the bank		pecified	ın	tne sepai	rate instruc	tions		
14.	How do the lines compare?								
	14a. Line 12b is less than or equal to line 13. O Go to Part 3.	on the top of page 1, ch	eck box	۲1,	There is	no presum	nption of abuse	e.	
	14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2	The pre	esi	umption c	of abuse is	determined by	/ Form 12	22A-2.
Part	3: Sign Below								
	By signing here, I declare under penalty of perjury	that the information or	n this sta	ate	ment and	l in any atta	achments is tr	ue and c	orrect.
	χ /s/ ELIEZER REYES CASTRO								
	ELIEZER REYES CASTRO Signature of Debtor 1								
	Date February 28, 2018 MM / DD / YYYY								
	If you checked line 14a, do NOT fill out or file Form	m 122A-2.							
	If you checked line 14b, fill out Form 122A-2 and f	file it with this form.							

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Debtor 1 ELIEZER REYES CASTRO	lines 40 or 42:
ELIELEK KETES SASTIKS	
	According to the calculations required by this
Debtor 2 (Spouse, if filing)	Statement:
United States Bankruptcy Court for the: District of Puerto Rico	■ 1. There is no presumption of abuse.
	☐ 2. There is a presumption of abuse.
Case number (if known)	
	☐ Check if this is an amended filing
Official Form 122A - 2	
Chapter 7 Means Test Calculation	04/10
To fill out this form, you will need your completed copy of Chapter 7 Statement of Y	Your Current Monthly Income (Official Form 122A-1)
To the dat and form, you will noon your completed copy of chapter ? classification?	real carrette monany meeme (emetar i emi 122/11/)
Be as complete and accurate as possible. If two married people are filing together,	
space is needed, attach a separate sheet to this form, Include the line number to whadditional pages, write your name and case number (if known).	hich additional information applies. On the top any
Part 1: Determine Your Adjusted Income	
Copy your total current monthly income. Copy line 11 from Office.	fficial Form 122A-1 here=> \$ 4,486.37
2. Did you fill out Column B in Part 1 of Form 122A-1?	
■ No. Fill in \$0 for the total on line 3.	
☐ Yes. Is your spouse Filing with you?	
☐ No. Go to line 3.	
☐ Yes. Fill in \$0 for the total on line 3.	
 Adjust your current monthly income by subtracting any part of your spouse's household expenses of you or your dependents. Follow these steps: 	s income not used to pay for the
On line 11, Column B of Form 122A–1, was any amount of the income you reported expenses of you or your dependents?	d for your spouse NOT regularly used for the household
■ No. Fill in 0 for the total on line 3.	
☐ Yes. Fill in the information below:	
	ill in the amount you
	re subtracting from our spouse's income
\$	
\$	
\$_	
Total\$	0.00
	Copy total here=> \$ 0.00
	<u> </u>
Adjust your current monthly income. Subtract line 3 from line 1.	\$ 4,486.37

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Debtor 1 ELIEZER REYES CASTRO

Case number (if known)

п.	 9
-	~

Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted fro your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from in income in lines 5 and 6 of form 122A-1.

If your expenses differ from month to month, enter the average expense.

Whenever this part of the from refers to you, it means both you and your spouse if Column B of Form 122A-1 is filled in.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

1

National Standards

You must use the IRS National Standards to answer the guestions in lines 6-7.

6. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

639.00

7. **Out-of-pocket health care allowance:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age

- 7a. Out-of-pocket health care allowance per person \$_____
- 7b. Number of people who are under 65 X ______1
- 7c. Subtotal. Multiply line 7a by line 7b. \$ 49.00 Copy here=> \$ 49.00

People who are 65 years of age or older

- 7d. Out-of-pocket health care allowance per person \$ 117
- 7e. Number of people who are 65 or older X 0
- 7f. **Subtotal.** Multiply line 7d by line 7e. \$ ______ **0.00 Copy here=> +\$** _____ **0.00**
- 7g. Total. Add line 7c and line 7f \$______\$

Copy total here=>

49.00

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Debtor 1 ELIEZER REYES CASTRO

Case number (if known)

Loc	al St	andards	You mus	st use the IRS Local Sta	andards to answ	wer the ques	stions in lin	nes 8-15.					
				the IRS, the U.S. Trus two parts:	stee Program	has divided	I the IRS L	ocal Stand	ard for I	nousin	g for		
_				nsurance and operatin Mortgage or rent exper									
То	answ	er the que	estions ir	n lines 8-9, use the U.S	3. Trustee Pro	gram chart							
				sing the link specified in able at the bankruptcy c		instructions	for this for	m.					
8.				Insurance and operated for your county for in							5, fill \$		398.00
9.	Hou	ising and	utilities -	Mortgage or rent exp	enses:								
	9a.	•		of people you entered in nty for mortgage or rent	•				\$;	568.00		
	9b.	Total ave	erage mor	nthly payment for all mo	rtgages and ot	her debts se	ecured by y	our home.					
				tal average monthly pay o each secured creditor en divide by 60.									
		Name of	the credit	or		Average m payment	onthly						
		BANCO	POPUL	.AR		\$	839.00						
				Total average monthly	y payment	\$	839.00	Copy here=>	-\$		839.00	Repeat this amount on line 33a.	
	9c.	Net mort	gage or re	ent expense.									
				otal average monthly pa f this amount is less tha				\$		0.00	Copy here=>	\$	0.00
10.	If yo	ou claim the ca	hat the U	.S. Trustee Program's of your monthly expe	division of the	e IRS Local	l Standard al amount	l for housin you claim.	g is inc	orrect	and	\$	0.00
	Ex	plain why:											
11.	Loc	al transpo	ortation e	expenses: Check the nu	umber of vehic	les for which	ı you claim	an ownersh	nip or op	erating	expense.		
). Go to lin	e 14.										
	1	I. Go to lin	e 12.										
		2 or more.	Go to line	: 12.									

Official Form 122A-2

12. **Vehicle operation expense:** Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the *Operating Costs* that apply for your Census region or metropolitan statistical area.

250.00

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Debtor 1 ELIEZER REYES CASTRO

13.	You may		rpense: Using the IRS Local if you do not make any loan						
Ve	hicle 1	Describe Vehicle 1:	2015 MERCEDES BEN	Z C300					
13a.	Ownersh	nip or leasing costs usin	g IRS Local Standard			\$	485.00		
13b.	_	monthly payment for a notice costs for leased	Il debts secured by Vehicle 1 vehicles.						
	are cont		ly payment here and on line ccured creditor in the 60 mon			t			
	Naı	me of each creditor fo	r Vehicle 1	Average payment					
	РО	PULAR AUTO		\$	822.70				
		Total /	Average Monthly Payment	\$	822.70	Copy here =>	-\$ 822	.70 Repeat this amount on line 33b.	
13c.		icle 1 ownership or leas line 13b from line 13a.	e expense if this amount is less than \$0), enter \$0.		\$	0.00	Copy net Vehicle 1 expense here => \$	0.00
Ve	hicle 2	Describe Vehicle 2:							
13d.	Ownersh	nip or leasing costs usin	g IRS Local Standard			. \$	0.00		
13e.	Average leased v		Il debts secured by Vehicle 2	. Do not incl	ude costs for				
	Naı	me of each creditor fo	r Vehicle 2	Average payment					
				\$					
		Total /	Average Monthly Payment	\$		Copy here => -\$	0.00	Repeat this amount on line 33c.	
13f.	Net Vehi	icle 2 ownership or leas	e expense					Copy net Vehicle 2	
	Subtract	line 13e from line 13d.	if this amount is less than \$0), enter \$0		\$	0.00	expense here => \$	0.00
14.			e: If you claimed 0 vehicles in				ards, fill in the I	Public \$_	0.00
15.	also ded	luct a public transportati	on expense: If you claimed ion expense, you may fill in vocal Standard for <i>Public Trans</i>	vhat you bel					0.00

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Debtor 1 ELIEZER REYES CASTRO

Oth	her Necessary Expenses In addition to the expe	nse deductions listed above, you are allowed your monthly expenses gories.	for	
16.	self-employment taxes, social security taxes, and I your pay for these taxes. However, if you expect to and subtract that number from the total monthly an	ually owe for federal, state and local taxes, such as income taxes, Medicare taxes. You may include the monthly amount withheld from a receive a tax refund, you must divide the expected refund by 12 mount that is withheld to pay for taxes.	\$	932.00
	Do not include real estate, sales, or use taxes.		Ψ	
17.	 Involuntary deductions: The total monthly payrol contributions, union dues, and uniform costs. 	ll deductions that your job requires, such as retirement		0.00
	Do not include amounts that are not required by yo	our job, such as voluntary 401(k) contributions or payroll savings.	\$	0.00
18.	filing together, include payments that you make for	you pay for your own term life insurance. If two married people are ryour spouse's term life insurance. Do not include premiums for life use's life insurance, or for any form of life insurance other than	\$	65.00
19.	. Court-ordered payments: The total monthly amo administrative agency, such as spousal or child su	unt that you pay as required by the order of a court or pport payments.		
	Do not include payments on past due obligations f	or spousal or child support. You will list these obligations in line 35.	\$	0.00
20.	. Education: The total monthly amount that you pay	y for education that is either required:		
	as a condition for your job, or			
	for your physically or mentally challenged depe	ndent child if no public education is available for similar services.	\$	84.00
21.	. Childcare: The total monthly amount that you pay	for childcare, such as babysitting, daycare, nursery, and preschool.		
	Do not include payments for any elementary or see	condary school education.	\$	0.00
22.		urance costs: The monthly amount that you pay for health care ryour dependents and that is not reimbursed by insurance or paid unt that is more than the total entered in line 7.		
	Payments for health insurance or health savings a	ccounts should be listed only in line 25.	\$	125.00
23.	for you and your dependents, such as pagers, call	e total monthly amount that you pay for telecommunication services waiting, caller identification, special long distance, or business cell alth and welfare or that of your dependents or for the production of		
		e, internet and cell phone service. Do not include self-employment cial Form 122A-1, or any amount you previously deducted.	+\$	0.00
24.	. Add all of the expenses allowed under the IRS Add lines 6 through 23.	expense allowances.	\$	2,542.00

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Debtor 1 ELIEZER REYES CASTRO

Add	itional E	xpense Deductions These are additional	deductions	allowed by the	e Means Test.		
		Note: Do not include	any expens	e allowances	listed in lines 6-24.		
25.	insuranc	nsurance, disability insurance, and health see, disability insurance, and health savings accommodants.				r	
	Health in	nsurance	\$	0.00			
	Disabilit	y insurance	\$	0.00			
	Health s	avings account	+ \$	0.00			
	Total		\$	0.00	Copy total here=>	\$	0.00
	Do you a	actually spend this total amount?			ı		
	_	No. How much do you actually spend? Yes	\$				
26.	Continue continue your hou	tes led contributions to the care of household of the care of household of the reasonable and necessary care usehold or member of your immediate family we contributions to an account of a qualified ABLE	or family me and suppo	ort of an elderly e to pay for su	y, chronically ill, or disabled member of uch expenses. These expenses may	\$	0.00
27.		ion against family violence. The reasonably for you and your family under the Family Violence					
	By law, t	the court must keep the nature of these expens	ses confide	ntial.		\$	56.00
28.	Additional line 8.	nal home energy costs. Your home energy o	osts are inc	luded in your	insurance and operating expenses on		
		elieve that you have home energy costs that ar ill in the excess amount of home energy costs.		n the home er	nergy costs included in expenses on line		
		st give your case trustee documentation of you claimed is reasonable and necessary.	ır actual exp	penses, and y	ou must show that the additional	\$	0.00
29.	\$160.42	on expenses for dependent children who a * per child) that you pay for your dependent chementary or secondary school.					
		st give your case trustee documentation of you is reasonable and necessary and not already					
	* Subjec	t to adjustment on 4/01/19, and every 3 years	after that fo	or cases begun	n on or after the date of adjustment.	\$	0.00
30.	higher th	nal food and clothing expense. The monthly nan the combined food and clothing allowance of the food and clothing allowances in the IRS	s in the IRS	National Star			
		a chart showing the maximum additional allowa ons for this form. This chart may also be availa					
	You mus	st show that the additional amount claimed is r	easonable a	and necessary	y.	\$	0.00
31.		ting charitable contributions. The amount the ents to a religious or charitable organization. 26			ntribute in the form of cash or financial	+\$	186.00
32.		of the additional expense deductions. s 25 through 31.				\$	242.00

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Debtor 1 ELIEZER REYES CASTRO

3. F c	ctions for Debt Payment						
	or debts that are secured by an intere ans, and other secured debt, fill in lin	st in property that you own, including home i es 33a through 33e.	mor	tgages, vel	nicle		
	o calculate the total average monthly payeditor in the 60 months after you file for	yment, add all amounts that are contractually du bankruptcy. Then divide by 60.	e to	each secur	ed		
	Mortgages on your home:						verage monthly syment
Ва.	Copy line 9b here				=:	> \$	839.00
	Loans on your first two vehicles:						
ßb.	Copy line 13b here				=:	> \$	822.70
Sc.	Copy line 13e here				=:	> \$	0.00
d.	List other secured debts:						
ıme	of each creditor for other secured debt	Identify property that secures the debt			payment e taxes o nce?	r	
					No		
	-NONE-				Yes	\$	
						٠.	
					No		
		_		_ □	Yes	\$	
					No		
				_	Yes	+\$	
						·Ψ.	
se.	Total average monthly payment. Add lin			4.00		Copy total	
	Total average monthly payment. Add in	nes 33a through 33d	\$_	1,66	1.70	here=>	\$ 1,661.70
. A ı	re any debts that you listed in line 33	nes 33a through 33d secured by your primary residence, a vehicle upport or the support of your dependents?		1,66	1.70		\$ 1,661.70
A . OI	re any debts that you listed in line 33	secured by your primary residence, a vehicle		1,66	1.70		\$ 1,661.70
. Ai	re any debts that you listed in line 33 other property necessary for your sull No. Go to line 35. Yes. State any amount that you must	secured by your primary residence, a vehicle upport or the support of your dependents? It pay to a creditor, in addition to the payments sion of your property (called the cure amount).		1,66	11.70		\$ 1,661.70
i. Ai	re any debts that you listed in line 33 rother property necessary for your sull No. Go to line 35. Yes. State any amount that you must listed in line 33, to keep posses	secured by your primary residence, a vehicle upport or the support of your dependents? It pay to a creditor, in addition to the payments sion of your property (called the cure amount).		Total cur			Monthly cure amount
. Ai or ■	re any debts that you listed in line 33 rother property necessary for your sull No. Go to line 35. Yes. State any amount that you must listed in line 33, to keep posses Next, divide by 60 and fill in the	secured by your primary residence, a vehicle apport or the support of your dependents? It pay to a creditor, in addition to the payments sion of your property (called the cure amount). information below. Identify property that secures the debt BO MONTONES II SECT TIERRA LINDA CARR 919 KM 5.1 Las Piedras, PR 00771 Las Piedras County 2383.54 SQ. METER LOT WITH A CONCRETE STRUCTURE WITH LVING AND DINNING ROOMS, 3 BEDROOMS, 3 BATHS, KITCHEN, CARPOT AND	., A	Total cur amount	e	here=>	Monthly cure amount
. Ai or ■	re any debts that you listed in line 33 rother property necessary for your sull No. Go to line 35. Yes. State any amount that you must listed in line 33, to keep posses Next, divide by 60 and fill in the e of the creditor	secured by your primary residence, a vehicle apport or the support of your dependents? It pay to a creditor, in addition to the payments sion of your property (called the cure amount). information below. Identify property that secures the debt BO MONTONES II SECT TIERRA LINDA CARR 919 KM 5.1 Las Piedras, PR 00771 Las Piedras County 2383.54 SQ. METER LOT WITH A CONCRETE STRUCTURE WITH LVING AND DINNING ROOMS, 3 BEDROOMS,	Α	Total cur amount	e :7.00	here=> 60 = \$	Monthly cure amount
. Ai or ■	re any debts that you listed in line 33 rother property necessary for your sull No. Go to line 35. Yes. State any amount that you must listed in line 33, to keep posses Next, divide by 60 and fill in the e of the creditor	secured by your primary residence, a vehicle apport or the support of your dependents? It pay to a creditor, in addition to the payments sion of your property (called the cure amount). information below. Identify property that secures the debt BO MONTONES II SECT TIERRA LINDA CARR 919 KM 5.1 Las Piedras, PR 00771 Las Piedras County 2383.54 SQ. METER LOT WITH A CONCRETE STRUCTURE WITH LVING AND DINNING ROOMS, 3 BEDROOMS, 3 BATHS, KITCHEN, CARPOT AND	A.	Total cur amount	e :7.00 ÷ ÷	here=>	Monthly cure amount
. Ai or ■	re any debts that you listed in line 33 rother property necessary for your sull No. Go to line 35. Yes. State any amount that you must listed in line 33, to keep posses Next, divide by 60 and fill in the e of the creditor	secured by your primary residence, a vehicle apport or the support of your dependents? It pay to a creditor, in addition to the payments sion of your property (called the cure amount). information below. Identify property that secures the debt BO MONTONES II SECT TIERRA LINDA CARR 919 KM 5.1 Las Piedras, PR 00771 Las Piedras County 2383.54 SQ. METER LOT WITH A CONCRETE STRUCTURE WITH LVING AND DINNING ROOMS, 3 BEDROOMS, 3 BATHS, KITCHEN, CARPOT AND	A.	Total cur amount	e :7.00 ÷ ÷	here=> 60 = \$ 60 = \$	Monthly cure amount
. Ai or ■	re any debts that you listed in line 33 rother property necessary for your sull No. Go to line 35. Yes. State any amount that you must listed in line 33, to keep posses Next, divide by 60 and fill in the e of the creditor	secured by your primary residence, a vehicle apport or the support of your dependents? It pay to a creditor, in addition to the payments sion of your property (called the cure amount). information below. Identify property that secures the debt BO MONTONES II SECT TIERRA LINDA CARR 919 KM 5.1 Las Piedras, PR 00771 Las Piedras County 2383.54 SQ. METER LOT WITH A CONCRETE STRUCTURE WITH LVING AND DINNING ROOMS, 3 BEDROOMS, 3 BATHS, KITCHEN, CARPOT AND	A.	Total cur amount	e :7.00 ÷ ÷	here=> 60 = \$ 60 = \$	Monthly cure amount

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Debtor 1	ELIE	ZER REYES CASTRO	Case number	(if known)		
	-	owe any priority claims such as a priority tax, child support, or alimony due as of the filing date of your bankruptcy case? 11 U.S.C. § 507.	- that			
	No.	Go to line 36.				
	Yes.	Fill in the total amount of all of these priority claims. Do not include current of ongoing priority claims, such as those you listed in line 19.	or			
		Total amount of all past-due priority claims	\$	1 717 89	÷60 − \$	28 63

Document Page 53 of 62 **ELIEZER REYES CASTRO** Debtor 1 Case number (if known) 36. Are you eligible to file a case under Chapter 13? 11 U.S.C. § 109(e). For more information, go online using the link for Bankruptcy Basics specified in the separate instructions for this form. Bankruptcy Basics may also be available at the bankruptcy clerk's office. ■ No. Go to line 37 ☐ Yes. Fill in the following information. Projected monthly plan payment if you were filing under Chapter 13 Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. Copy total here=> Average monthly administrative expense if you were filing under Chapter 13 \$ 1,707.61 37. Add all of the deductions for debt payment. Add lines 33e through 36. **Total Deductions from Income** 38. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS 2.542.00 expense allowances Copy line 32, All of the additional expense deductions 242.00 Copy line 37, All of the deductions for debt payment 1,707.61 4.491.61 4.491.61 Total deductions Copy total here....=> Part 3: **Determine Whether There is a Presumption of Abuse** 39. Calculate monthly disposable income for 60 months 39a. Copy line 4, adjusted current monthly income 4,486.37 39b. Copy line 38, Total deductions 4,491.61 39c. Monthly disposable income. 11 U.S.C. § 707(b)(2). Copy -5.24 Subtract line 39b from line 39a here=>\$ For the next 60 months (5 years) x 60 Copy -314.40 -314.40 39d. Total. Multiply line 39c by 60 39d. here=> 40. Find out whether there is a presumption of abuse. Check the box that applies:

- The line 39d is less than \$7,700*. On the top of page 1 of this form, check box 1, There is no presumption of abuse. Go to Part 5.
- ☐ The line 39d is more than \$12,850*. On the top of page 1 of this form, check box 2, There is a presumption of abuse. You may fill out Part 4 if you claim special circumstances. Go to Part 5.
- ☐ The line 39d is at least \$7,700*, but not more than \$12,850*. Go to line 41.

*Subject to adjustment on 4/01/19, and every 3 years after that for cases filed on or after the date of adjustment.

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Debtor 1	ELIE	EZER REYES CASTRO	Case number (if known)	
41.	41a.	Fill in the amount of your total nonpriority unsecured debt. If you filled of A Summary of Your Assets and Liabilities and Certain Statistical Information Schedules (Official Form 106Sum), you may refer to line 3b on that form.	\$x .25	
	41b.	25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A)(i)	(l) \$ h	ere=> \$
		Multiply line 41a by 0.25		
25	% of y	ne whether the income you have left over after subtracting all allowed de your unsecured, nonpriority debt. he box that applies:	ductions is enough to pay	
		39d is less than line 41b. On the top of page 1 of this form, check box 1, <i>The</i> Part 5.	ere is no presumption of abus	e.
		39d is equal to or more than line 41b. On the top of page 1 of this form, che <i>umption of abuse.</i> You may fill out Part 4 if you claim special circumstances. T		
Part 4:	Giv	ve Details About Special Circumstances		
		we any special circumstances that justify additional expenses or adjustmental ealternative? 11 U.S.C. § $707(b)(2)(B)$.	ents of current monthly inc	ome for which there is no
■ N	lo. Go	o to Part 5.		
□ Y		I in the following information. All figures should reflect your average monthly em. You may include expenses you listed in line 25.	xpense or income adjustment	for each
	ne	ou must give a detailed explanation of the special circumstances that make the cessary and reasonable. You must also give your case trustee documentation ljustments.		
	G	Sive a detailed explanation of the special circumstances	Average monthly expense or income adjustment	
	_		\$	-
	_		\$	-
	_		\$	-
	_		\$	-
Part 5:	Sig	gn Below		
	_	gning here, I declare under penalty of perjury that the information on this state	ment and in any attachments	is true and correct.
	χ /s/	/ ELIEZER REYES CASTRO		
		LIEZER REYES CASTRO gnature of Debtor 1		
Da	7	ebruary 28, 2018		
	MI	M/DD/YYYY		

Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 08/01/2017 to 01/31/2018.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Preferred mortg (commissions)

Income by Month:

6 Months Ago:	08/2017	\$5,132.76
5 Months Ago:	09/2017	\$0.00
4 Months Ago:	10/2017	\$0.00
3 Months Ago:	11/2017	\$4,521.90
2 Months Ago:	12/2017	\$747.71
Last Month:	01/2018	\$0.00
	Average per month:	\$1,733.73

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: PREFERRED MORTG CORP (SALARY)

Income by Month:

6 Months Ago:	08/2017	\$1,256.66
5 Months Ago:	09/2017	\$1,256.66
4 Months Ago:	10/2017	\$1,256.66
3 Months Ago:	11/2017	\$1,256.66
2 Months Ago:	12/2017	\$4,733.55
Last Month:	01/2018	\$1,256.66
	Average per month:	\$1,836.14

Line 5 - Income from operation of a business, profession, or farm

Source of Income: PROFESSIONAL SERVICES & COMM

Income/Expense/Net by Month:

	Date	Income	Expense	Net
6 Months Ago:	08/2017	\$0.00	\$0.00	\$0.00
5 Months Ago:	09/2017	\$0.00	\$0.00	\$0.00
4 Months Ago:	10/2017	\$0.00	\$0.00	\$0.00
3 Months Ago:	11/2017	\$0.00	\$0.00	\$0.00
2 Months Ago:	12/2017	\$2,355.00	\$780.00	\$1,575.00
Last Month:	01/2018	\$0.00	\$0.00	\$0.00
	Average per month:	\$392.50	\$130.00	
			Average Monthly NET Income:	\$262.50

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Debtor 1 ELIEZER REYES CASTRO Case number (if known)

Line 10 - Income from all other sources

Source of Income: **VETERAN'S COMPENSATION**

Income by Month:

6 Months Ago:	08/2017	\$654.00
5 Months Ago:	09/2017	\$654.00
4 Months Ago:	10/2017	\$654.00
3 Months Ago:	11/2017	\$654.00
2 Months Ago:	12/2017	\$654.00
Last Month:	01/2018	\$654.00
	Average per month:	\$654.00

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

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Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case:18-01084-ESL7 Doc#:1 Filed:02/28/18 Entered:02/28/18 18:34:33 Desc: Main Document Page 61 of 62

B2030 (Form 2030) (12/15)

United States Bankruptcy Court District of Puerto Rico

In re	ELIEZER REYES CASTRO		Case No.			
		Debtor(s)	Chapter	7		
	DISCLOSURE OF COMPEN	SATION OF ATTO	RNEY FOR DI	EBTOR(S)		
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	of the petition in bankruptcy	, or agreed to be paid	to me, for services rendered or to		
	For legal services, I have agreed to accept		\$	1,200.00		
	Prior to the filing of this statement I have received		\$	1,200.00		
	Balance Due		\$	0.00		
2.	The source of the compensation paid to me was:					
	■ Debtor □ Other (specify):					
3.	The source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
4.	■ I have not agreed to share the above-disclosed competent	nsation with any other person	unless they are mem	bers and associates of my law firm.		
	☐ I have agreed to share the above-disclosed compensate copy of the agreement, together with a list of the name					
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:					
	 a. Analysis of the debtor's financial situation, and render b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of creditor d. [Other provisions as needed] 	ment of affairs and plan which	n may be required;			
6.	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any disc any other adversary proceeding, and other market value; exemption planning; prepaneeded; preparation and filing of motions goods, and or real property; Motion to directly analyze, review, draft and file post confirm	chargeability actions, judier contested matters. Ne action and filing of reaffir bursuant to 11 USC 522 msis; litigation objection	cial lien avoidance gotiations with se mation agreemen (f)(2)(A) for avoida to claims; litigation	ecured creditors to reduce to ts and applications as ance of liens on household on and practice 362 motions;		
		CERTIFICATION				
	I certify that the foregoing is a complete statement of any pankruptcy proceeding.	agreement or arrangement for	r payment to me for i	representation of the debtor(s) in		
F	February 28, 2018	/s/ RAMON F. LO	PEZ. ESQ.			
_	Date	RAMON F. LOPE	Z, ESQ. 203813 P	R		
		Signature of Attorne RAMON F. LOPE	ey Z LAW OFFICES,	P.S.C.		
		PO BOX 34173				
		Fort Buchanan, I	PR 00934			
		Name of law firm				

ELIEZER REYES CASTRO PO BOX 1428 JUNCOS, PR 00777

ORIENTAL BANK PO BOX 364746 SAN JUAN, PR 00936-4746 SYNCHRONY BANK / JCP PO BOX 960090 ORLANDO, FL 32896

RAMON F. LOPEZ, ESQ.

PAYPAL CREDIT RAMON F. LOPEZ LAW OFFICES, P.S.C.PO BOX 105658 PO BOX 34173 ATLANTA, GA 30348

WYNDHAM 6277 SEA HARBOR ORLANDO, FL 32821

FORT BUCHANAN, PR 00934

BANCO POPULAR PO BOX 362708 SAN JUAN, PR 00936 PEN FED CREDIT UNION PO BOX 247080 OMAHA, NE 68124-7080

WYNDHAM 6277 SEA HARBOR ORLANDO, FL 32821

BEST BUY PO BOX 78009 PHOENIX, AZ 85062 **PENTAGON** PO BOX 1432 ALEXANDRIA, VA 22313

CHASE PO BOX 15123 WILMINGTON, DE 19850 PENTAGON FEDERAL CREDIT UNION PO BOX 456 ALEXANDRIA, VA 22313

CITI PO BOX 6004 SIOUX FALLS, SD 57117-6004 POPULAR AUTO PO BOX 15011 SAN JUAN, PR 00902-8511

DEPARTAMENTO DE HACIENDA PO BOX 9024140 SAN JUAN, PR 00902-4140

POPULAR AUTO PO BOX 15011 SAN JUAN, PR 00902-8511

INTERNAL REVENUE BUREAU VIBIR 6115 EST SMITH BAY STE 225 ST THOMAS, VI 00802

SEARS PO BOX 78051 PHOENIX, AZ 85062-8051

MACYS PO BOX 78008 PHOENIX, AZ 85062-8008 SYNCHRONY BANK PO BOX 960061 ORLANDO, FL 32896-0061